## **United States Department of State**



Washington, D.C. 20520

UNCLASSIFIED

May 13, 2022

## MEMO FOR MARIA BREWER, U.S. AMBASSADOR TO LESOTHO

FROM:

S/GAC - Michael Ruffner, S/GAC Chair

S/GAC - Matt Wollmers, PEPFAR Program Manager

THROUGH: S/GAC – Dr. Angeli Achrekar, Acting U.S. Global AIDS Coordinator

SUBJECT:

PEPFAR Lesotho Country Operational Plan 2022 Approval

This memo represents the successful completion of the PEPFAR Lesotho Country Operational Plan (COP) 2022 planning, development, and submission process. PEPFAR Lesotho, together with the partner government, civil society, and multilateral partners of Lesotho, has planned and submitted a COP 2022 in alignment with the directives from the COP 2022 planning letter, datadriven decisions made during the in-country retreat, and agreements made during the planning meeting.

This memo serves as the approval for the PEPFAR Lesotho Country Operational Plan (COP) 2022, with a total approved budget of \$75,000,000, including all initiatives and applied pipeline, to achieve the targets and outcomes as listed in this memo and all appendices. Total budget is reflective of the following programming:

	New Funding (All Accounts)	Pipeline	Total Budget FY2023 Implementation
TOTAL	68,708,311	6,291,689	75,000,000
Bilateral	67,107,311	6,291,689	73,399,000
Central	1,601,000		1,601,000

The total FY 2023 outlay for COP 2022 implementation shall not exceed the total approved COP 2022 budget of \$75,000,000 without additional written approval. Any prior year funds that are not included within this COP 2022 budget and documented within this memo, its appendices, and official PEPFAR data systems, are not to be made available for execution and outlay during FY 2023 without additional written approval. The new FY 2022 funding and prior year funds approved within this memo as a part of the total COP 2022 budget are allocated to achieve specific results, outcomes, and impacts as approved. All requested Operational Plan Updates and shifting of funds – either between mechanisms and partners, or to add additional funding to mechanisms and partners for execution in FY 2023- must be submitted to and approved by S/GAC, and documented in FACTSInfo NextGen via the Operational Plan Update process.

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Approved funding will be made available to agencies for allocation to country platforms to implement COP 2022 programming and priorities as outlined below and in the appendix.

## **ARPA/ESF Funds**

All ARPA ESF funds from COP 2021 must be obligated by September 30, 2022. ARPA funds obligated by this date can continue to be outlayed for their approved purposes in COP 2022/FY 2023 on top of the approved COP 2022 envelope.

## **Background**

This approval is based upon: the discussions that occurred between the country team, agency headquarters, S/GAC, partner government, local and global stakeholders, and partners during the March 8-10, 2022 virtual planning meetings and participants in the virtual approval meeting; and the final COP 2022 submission, including all data submitted via official PEPFAR systems or within supplemental documents.

## **Program Summary**

Funding and targets for Lesotho's COP 2022 are approved to support PEPFAR Lesotho's vision to sustain the impact that has already been made in reaching epidemic control status, and to identify and address any remaining treatment or prevention gaps. This will be achieved through partnership with the Government of Lesotho and many key stakeholders via the efficient identification of people living with HIV (PLHIV) who were previously unaware of their status, linking and retaining them on treatment, and building on historic achievements to continue to reduce HIV incidence and enabling PLHIV to enjoy healthy, productive lives. The topline COP 2022 treatment target is to ensure that nationally, 257,820 of Lesotho's approximately 281,000 PLHIV are on life-saving antiretroval therapy (ART) by the end of FY 2023 (by the end of FY 2021, 232,182 PLHIV received ART through PEPFAR support). Entering COP 2021, Lesotho's progress towards epidemic control was validated by the release of the LePHIA 2020 survey results, which showed that Lesotho has achieved 90-97-92 on the 95-95-95 goals (i.e., at the time of the survey that concluded in March 2020, 90% of Basotho PLHIV were aware of their positive status, 97% of those aware of their status were receiving ART, and 92% of those receiving ART maintained viral suppression of their HIV).

The PEPFAR Lesotho programmatic strategy to be implemented in FY 2023 will be centered around finding the remaining PLHIV who are unaware of their status and ensuring that all PLHIV are linked to and retained in care to maximize the health benefits of ART and the prevention aspect of treatment. PEPFAR Lesotho will also continue to optimize complementary prevention efforts in order to further reduce incidence rates through programs such as its DREAMS (Determined Resilient Empowered AIDS-free Mentored and Safe) partnership for adolescent girls and young women, its VMMC (Voluntary Medical Male Circumcision) and pre-exposure prophylaxis (PrEP) efforts, and its programs to serve key populations. PEPFAR Lesotho will also take more concrete steps towards sustained impact during COP 2022.

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To optimize the success of these programs in FY 2023, PEPFAR Lesotho will ensure that critical policies are not just adopted, but fully implemented, and will continue or initiate several key strategies, such as: (1) Maintaining high retention levels, and better monitoring patients through stronger and more comprehensive health information systems, such as a national health systems database with unique patient identifiers; (2) Further enhancing collaboration with stakeholders and counterparts, including engagement with host government officials in exercises that review barriers to local control and develop longer-term plans for increasing levels of domestic responsibility for HIV epidemic control; (3) Refining index testing practices to deploy them with fidelity and at the appropriate scale; (4) Enhancing site-level monitoring, including through the community-led monitoring initiative; (5) Improving pediatric treatment services and continuing to provide support for Orphans and Vulnerable Children (OVC); (6) Providing layered services to eligible AGYW who have enrolled in DREAMS programming; (7) Working towards higher coverage of VMMC for men ages 15 and older; (8) Sustaining Lesotho's exceptionally high viral load suppression (in most disaggregated measures of program data across age, sex, and geography, the 95% threshold has already been reached) and finishing the expansion of lab capacity to provide annual viral load tests for 100% of eligible PLHIV; (9) Continuing to reach more Basotho eligible for Tuberculosis Preventive Therapy (TPT) and cervical cancer screening services; (10) Fully rolling out recency efforts to help identify any new sources of HIV cases and rapidly interrupt chains of transmission; and (11) Continuing to expand the reach of high-quality PrEP services, including incorporation into the multi-month dispensing (MMD) and decentralized drug distribution (DDD) services.

During FY 2023, PEPFAR funds for Lesotho will focus heavily on the continued implementation of these various strategies in order to reach and provide essential services to all PLHIV living in Lesotho in a people-centered way. The results of the PHIA survey will continue to help inform strategies that are meant to quickly fill any remaining programmatic gaps across all age, sex, and geography sub-categories. Although a number of PEPFAR Lesotho's programmatic features will look similar to prior COP years, there will be a stronger emphasis on increasing the efficiency of efforts, particularly with case-finding and repurposing certain healthcare cadres to a right-sized footprint that best serves the needs of Lesotho's PLHIV. Case-finding efforts will continue to incorporate approaches such as risk-screening and HIV self-testing to enhance the efficiency and effectiveness of case-finding while still also meeting the highest safety and ethical standards, including through informed consent. Now that community-led monitoring has received authorization from all parties to proceed as planned, PEPFAR Lesotho should redouble its efforts with community groups to ensure that high-quality, people-centered HIV services are delivered throughout the country.

With the longer-term sustainability of programs coming further into focus during COP 22, several strategic adjustments should be prioritized. In their current form, the programs that PEPFAR Lesotho supports are not right-sized for the government of Lesotho to seamlessly take on more responsibility. The team should therefore work with the Government of Lesotho to identify their needs, and then to streamline and help them better integrate systems. The increased focus on sustainability will also mean that PEPFAR Lesotho will increasingly work with and implement activities through indigenous partners to build local capacity. These capacity building efforts are also crucial to extend to our host government partners. Part of COP 2022 programming will be designed to build up the core administrative, financial, and technical

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competencies of governmental and institutional partners in order to better enable them to do the necessary work on the ground.

## **Funding Summary**

All COP 2022 funding summarized in the charts below is approved at the agency and account levels as indicated. Funds are to be utilized to achieve the targets and outcomes and to fund implementing partners and Management and Operations costs (U.S. Government Costs of Doing Business) as documented in PEPFAR systems.

## COP 2022 Budget Table by Agency - Bilateral

					of which, Bilateral				
					New Funding				
	Total			FY 2022	221		FY 2021	FY 2020	Applied Pipeline
		Total	Total	GMP-State	GHP-USAID	GAP	GHP-State	GHP-State	
TOTAL	000,888,87	1116,701,73	07-107-10F	66,594,811	THE RESERVE	512,500	N		6,291,689
DOD Total	973,000	488,237	70,000	(47,13)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Dist. Description		300	284,76
000	973,000	688,237	688,237	688,237		4			284,763
HHS Total	301,788,02	26,240,733	26,240,733	25,728,233	1000	512,500	100	THE REAL PROPERTY.	3,456,452
низусос	29,697,185	26,240,733	26,240,733	25,728,233		512,500			3,456,452
P.C. Total	TISON - INCOME	145,010	OLDEN	145,010	1000		The state of the s		831,580
PC	876,618	145,030	145,030	145,030			÷	٠	831,588
STATETOLM	841,734	291,272	1. C. S.P. (GS. )	\$61,872	59		2	S S S	266,539
State	171,143	171,143	171,143	171,143	1	,		F	
State/AF	670,591	404,052	404,052	404,052			**	•	266,539
USAID Total	40,910,463	39,458,116	*** 19,455\http://	39,458,116	7.00		28	2 2 2 2	DE SET
USAID, non-WCF	39,015,752	37,563,405	37,563,405	37,563,405		(A)	•		1,452,347
USAIDANCF	1,894,711	1.894.711	1894.711	1.894.711					

<sup>\*</sup>Applied Pipeline refers to funding allocated in prior years, approved for implementation in FY 2023.

COP 2022 Budget Table by Agency - Central

					of which, Central				
					New Funding				
	Total			FY 2022	22		FY 2021	FY 2020	Applied Pipeline
		Total	Total	GHP-State	GMP-USAID	GAP	GHP-State	GMP-State	
TOTAL	1,601,000	1,601,000	3,663,000	1,401,000	200,000				
DOD Total								2 mg/ mg	
000	1	E		¥3				,	
HHS Total									200
HHS/CDC	(4)			6					•
PC Total								9	*
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STATE Total			THE RESERVE	The second					
State	16		ď		*	×	,	,	
State/AF	9		,					,	
USAID Total	1,601,000	1,601,000	1,601,900	1,401,000	200,000	The state of the s	2000		100
USAID, non-WCF	1,401,000	1,401,000	1,401,000	1,401,000	+		3		(0)
USAID/WCF	200,000	200,000	200,000	6.3	200,000		•	٠	

<sup>\*</sup>Applied Pipeline refers to funding allocated in prior years, approved for implementation in FY 2023.

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**GHP-State Funds:** Upon the clearance of a FY 2022 PEPFAR GHP-State Congressional Notification (CN), funds will be made available for transfer to agency HQs as indicated in the above chart. Funds are made available for outlay in FY 2023 at approved COP 2022 partner budget levels to achieve FY 2023 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Upon receipt from S/GAC, agency headquarters will move the funds to the country platform via each agency's internal process.

**CDC GAP Funds:** With the receipt of this signed memo, CDC is approved to use CDC GAP funds, as indicated in the above funding chart. Funds are to be made available for outlay in FY 2023 at approved COP 2022 partner budget levels to achieve FY 2023 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. With this approval, CDC GAP funding may be made available to country teams per CDC internal processes and following agency requirements.

**Applied Pipeline Funds:** With the receipt of this signed memo, respective agencies are approved to use applied pipeline funds as indicated in the above funding chart. Funds are to be made available for outlay in FY 2023 at approved COP 2022 partner budget levels to achieve FY 2023 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Additional or remaining pipeline from previous year's activities that are not currently captured in the COP 2022 total budget level and documented within COP 2022 partner budgets are not to be executed or outlayed without written approval from S/GAC.

**Earmarks:** Lesotho has planned for programming for FY 2022, FY 2021, and/or FY 2020 GHP-State funding that it considered to meet a number of earmarks, as indicated in the table below. The amounts programmed during COP may exceed the original controls assigned to the OU. Upon approval of this memo, the amounts below will become the new earmark controls for the Lesotho. Any changes to the amount of funding programmed for earmark-eligible activities must be approved via an OPU.

	The Parks	COP22 Fund	ing Level	
Earmarks	TOTAL	FY 2022	FY 2021	FY 2020
Care & Trestment	34,046,790	34,046,790		
Orphans and Vulnerable Children	14,131,645	14,131,645		
Preventing and Responding to Gender- based Violence	215,600	215,600	- der	•
Water	630,000	630,000	+	

<sup>\*</sup> Only GHP-State and GHP-USAID will count towards the Care and Treatment and OVC earmarks

<sup>\*\*</sup> Only GHP-State will count towards the GBV and Water earmarks

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A8/Y Earmark	TOTAL	FY 2022	FY 2021	FY 2020	Applied Pipeline
TOTAL Sexual Prevention Programming	3,472,179	3,472,179	-	-	
Of which, AB/Y	2,377,288	2,377,288			
% AB/Y of TOTAL Sexual Prevention Programming	68.5%	68.5%	N/A	N/A	N/

<sup>\*</sup>Applied Pipeline refers to funding allocated in prior years, approved for implementation in FY 2023.

## AB/Y Earmark Budget Justification

The AB/Y earmark requirement is met.

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## **Initiatives by Agency**

	Total Bilateral - New Funding	Total Bilateral Applied Pipeline	Total Central - New Funding	Total Central Applied Pipeline	Total COP22 Budget
TOTAL	67,107,311	6,291,689	1,601,000		75,000,000
of which, Cervical Cancer	1,000,000	HIS SEA			1,000,000
of which, Community-Led Monitoring	250,000				250,000
of which, Condons (GHP-USAID Central Funding) (Central)			200,000		200,000
of which, Care Program	45,606,164	4,291,689			51,897,853
of which, DREAMS	14,000,000				14,000,000
of which, OVC (Non-DREAMS)	4,255,947		DE NO SECOND		4,255,947
of which, USAID Southern Africa Regional Platform (Central)			1,401,000	MY Con	1,401,000
of which, VMMC	1,995,200				1,995,200
DOD Total	688,237	284,763			973,000
of which, Core Program	688,237	284,763			973,000
HHS Total	26,240,733	3,456,452	Jee Land	1000	29,697,185
of which, Cervical Cancer	416,700	N.	-		416,700
of which, Core Program	22,110,439	3,456,452		8	25,566,891
of which, DREAMS	3,713,594	-		8	3,713,594
PC Total	145,030	831,588		F BAR	976,618
of which, Core Program	145,030	831,588			976,618
STATE Total	575,195	266,539			841,734
of which, Community Led Monitoring	250,000	- E	-		250,000
of which, Core Program	325,195	266,539		9.	591,734
USAID Total	39,458,116	1,452,347	1,661,000		42,511,463
of which, Cervical Cancer	583,300			,	583,300
of which, Condoms (GHP-USAID Central Funding) (Central)	8	3	200,000	8	200,000
of which, Care Program	22,337,263	1,452,347	2	91	23,789,610
of which, DREAMS	10,286,406	iá.	2	-	10,286,406
of which, OVC (Non-DREAMS)	4,255,947		2	4:	4,255,947
of which, USAID Southern Africa Regional Platform (Central)	4:	18	1,491,000		1,491,099
of which, PMMC	1,995,200	•			1,995,200

## FY 2023 Target Summary

COP 2022 funds are approved to achieve the following results in FY 2023.

		SNU Prioriti	zations
Leso	tho	Scale-up: Saturation	Total
	<15	791	791
TX_NEW	15+	13,651	13,731
	Total	14,442	14,522
TX CURR	<15 15+	7,940 248,246	7,940 249,880
IX_CORK	Total	256,186	257,820
	<15	5,931	5,931
TX_PVLS	15+	212,261	213,795
	Total	218,192	219,726
	<15	7,243	7,264
HTS_SELF	15+	267,437	270,668
	Total	274,680	277,932
HTS_TST	<15 15+	32,039 149,207	32,039 151,550
1113_131	Total	181,246	183,589
	< 15	397	397
HTS_TST_POS	15+	9,800	9,880
	Total	10,197	10,277
HTS_RECENT	Total	7,725	7,805
	<15	5,380	5,380
HTS_INDEX	15+	7,320	7,386
	Total	12,700	12,766
PMTCT STAT	<15 15+	127 31, 150	127 31, 270
FILICI_STAT	Total	31,277	31,397
	<15	6	6
PMTCT_STAT_ POS	15+	6,753	6,766
PO3	Total	6,759	6,772
PMTCT ART	<15 15+	6 6,720	6,733
PMICI_ARI	Total	6,726	6,739
PMTCT_EID	Total	6,805	6,818
	<15	625	625
TB_STAT	15+	9,311	9,331
	Total	9,936	9,956
TD ADT	<15	359	359
TB_ART	15+	6,298	6,310
	<b>Total</b> < 15	<b>6,657</b> 1,146	<b>6,669</b> 1,146
TB PREV	15+	26,559	26,759
. D_1 1124	Total	27,705	27,905
	<15	8,743	8,743
TX_TB	15+	259,718	261,384
	Total	268,461	270,127
VMMC_CIRC	Total	20,220	20,220
KP_PREV PrEP_NEW	Total Total	13,294 31,808	13,294 31,888
PrEP CT	Total	11,406	11,451
CXCA_SCRN	Total	54,890	55,146
	<15	41,328	41,328
PP_PREV	15+	177,148	177,148
	Total	218,476	218,476
0110 0==::	<18	74,004	74,004
OVC_SERV	18+	21,421	21,421
OVC_HIVSTAT	Total Total	95,425 50,579	95,425 50,579
GEND GBV	Total	3,614	3,614
AGYW_PREV	Total	39,714	39,714

<sup>\*</sup> Totals may be greater than the sum of categories due to activities outside of the SNU prioritization areas outlined above.

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## Partner Management and Stakeholder Engagement:

Agreements made during COP 2022 discussions, including those regarding geographic focus, targets, budgets, SIMS, use of pipeline, partner implementation and partner management will be monitored and evaluated on a regular basis via both ad hoc check-ins and discussions as well as the joint HQ and country team POART discussions. It is expected that teams closely monitor partner performance and engage with each implementing partner on a regular basis to ensure achievement of targets, outcomes and impact in a manner consistent with this memo, approved SDS, and budgets and targets as finalized in PEPFAR systems. Any partner with EITHER (1) <15 percent of target achievement at 3 months or (2) less than 40 percent of target achievement at 6 months must have a complete review of performance data (including trends in performance) and outlays to date, implement remediation, and conduct intensive follow-up. In the HIV treatment program, most clients are continuing on treatment year after year and current on treatment (TX CURR) performance should between 98 percent and 100 percent of the target. This can be adjusted in country context where HIV treatment services are still scaling up and the treatment new target is greater than 10 percent of treatment current. OVC programs are also similar in that there are clients continuing services from the previous year; if the IP is at less than 80 percent of their target by the end of Q2, performance review should be initiated. These elements (i.e. review, remediation, and follow-up) should be incorporated into the existing IP work plans. A second quarter of consistently poor performance by the IP should also result in implementation of a documented Performance Improvement Plan (PIP) or Corrective Action Plan (CAP), in accordance with implementing agency policy. PIP indicators should reflect the core issue. For example, if the issue is linkage of those testing positive to treatment, the indicator measured should be test positive to new in treatment, with a bare minimum threshold of 85 percent. If the issue is retention, it should be net new on treatment at least 90 percent of new on treatment. After two quarters of intensive oversight and remediation for underperformance, partners should be close to full achievement of targets expected at quarter three. With a third quarter of consistently poor performance by the IP, implementing agencies should notify S/GAC of the actions the agency is implementing to address partner non-performance. including options for a shift to new partners. The country team should notify the S/GAC Chair and PPM immediately of the improvement plan.

Continued engagement with all stakeholders, including civil society and community members, multilateral partners and bilateral partners, is to continue throughout COP 2022 implementation. Core to this critical engagement is the sharing of and discussion surrounding quarterly results and achievement and findings from community-led monitoring. This continued engagement will ensure all parties' understanding of Lesotho's progress and help identify any strategic changes to be made in order to more efficiently and effectively reach epidemic control.

# COP 2021 - COP 2022 Budget Shifts by Funding Agency and Program Area

							COP 21 Budge	COP 21 Budget by Funding Agency and Program Area	ncy and Program	Wes						
Praiding Agency	GRAND TOTAL	% of TOTAL.	ASA	ASP as 75 of Total	CET	C&T at 75 of Total	ILCS	HTS as 15 of Total	K	P.M. zn. % of Total	PREV	PREV to % of Total	朝	SE at 15 of Total	Not Specified	Not Specified as 26 of Total
Ī	SWITTEN STATE	1771 107	1717		MARKET	X	77	2115	117104	200	TOTAL ST	100	2000		The second second	
000	900008	567	000%		000005	\$16	385,000	300	210,000	5965	10,000	14,		8	-	160
HHS	11,066,163	100	\$296,500	T.E	14,276,986	SW	125,951	100		N.	1,055,533	345	4	£		S
'n.	819/906	541		S		50		\$	\$19'182		135,600	1455	90004	345	-	Š
SEATE	(12629)	541		S	2,00,000	X1		8	132,078	Subi.		6				8
USAID	44,56,025	£.	120,900	K.	11,510,110	286	1,588,759	200	10,600,412	34%	110,027,0	22%	\$,053,240	186	7	S
							COP 22 Budge	COP 22 Budget by Funding Agency and Program Area	ncy and Program	Area						
Funding Agency	GRAND TOTAL	% of TÜTAI.	ASP	ASP as 25 of Total	CAT	C&T as % of Tours	SLII	If IS as % of Total	Z	P.M. as: 75 of Total	PREY	PREV as % of Total	Ħ	SC as % of Total	Net Steroffled	Net Specified as % of Total
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000	000 120	52	3,000	80	410,455	424	185,000	10%	366.565	17%	10,000	141		S		S
IIIES	29,463,185	40x	4,279,542	34%	14,555,503	100	4,092,445	14%	1,444,464	13%	1,111,601	100		8		8
w.	مرود ه	12	-	ś		°40		50	181.418	308	195,000	20%		ď,		8
STATE	841,234	563		140	250,000	100		.00	101,714	SQ.		Ś		Ś		S
QIVSID	(2,01,61	£	1,558,375	:6 <del>1</del>	10,207,758	24%	1,419,555	£	11 (1) (8	26%	010'515'8	20%	7,639,234	180		Ś
						COP 21-22 (	Sudget Shifts by	COP 21-22 Budget SMPs by Funding Agency and Program Area	and Program Are							
Funding Agency	Tetal Charge	Change in ASP	3. Change la ASP	Charge In CAT	% Change in CAT	Change in ICTS % Change in ICTS	A Change to HTS	Change in P.M.	26 Change do P.M.	Change to PREV	% Change in PREV	Change In SE	% Change In SE	Change in Not 3pr cifled	% Change in Not Specified	
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DOD	33,000		(U)	(50,545)	1380		86	111,545	200		8					
IIIES	(4,346,318)	(1,016,739)	1991.		74 h	(1),144,3191	,23%	392,872	2	355,660	34%	-				
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SAT.	(147.117)	4			8	•		1287,517)	336							
Usaib	(2.05).34(1)	361354	100	(1331,641)	-12%	(168,83h)	180	436,174	£	(1264,897)	-13%	(4)4,056)	-50			